

REISSUE PATENT APPLICATION TRANSMITTAL

Address to: U.S. PTO Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	970054.401RI
	First Named Inventor	Aloys Wobben
	Original Patent Number	6,400,039
	Original Patent Issue Date (Month/Day/Year)	June 4, 2002
	Express Mail Label No.	EV347012733US

APPLICATION FOR REISSUE OF:
(Check applicable box)

 Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status. See 37 CFR 1.27.
3. Specification and Claims in double column copy of patent format (amended, if appropriate)
4. Drawing(s) (proposed amendments, if appropriate)
5. Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. Power of Attorney
7. Original U.S. Patent currently assigned? Yes No
(If Yes, check applicable box(es))
 - Written Consent of all Assignees (PTO/SB/53)
 - 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
8. CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. Statement of status and support for all changes to the claims. See 37 CFR 1.173(c)
11. Original U.S. Patent for surrender
 - Ribboned Original Patent Grant
 - Statement of Loss (PTO/SB/55)
12. Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. Information Disclosure Statement (IDS)/PTO/1449
 - Copies of IDS Citations
14. English Translation of Reissue Oath/Declaration
(if applicable)
15. Preliminary Amendment
16. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: Application Data Sheet
Offer to Surrender the Original Patent
Copy of U.S. Patent No. 6,400,039 B1

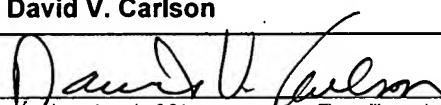
18. CORRESPONDENCE ADDRESS

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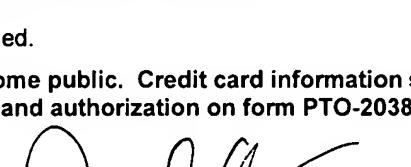
Name			
Address			
City	State	Zip Code	
Country	Telephone		
	Fax		

NAME (Print/Type)	David V. Carlson	Registration No. (Attorney/Agent)	31,153
Signature			Date
			April 21, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) 970054.401R1			
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 7	Total Claims (37 CFR 1.16(j))	(B) 19	**** 0 =	x \$ _____ =		x \$ <u>18</u> =	0	
(C) 1	Independent Claims (37 CFR 1.16(i))	(D) 3	* 0 =	x \$ _____ =		x \$ <u>86</u> =	0	
Basic Fee (37 CFR 1.16(h)) \$ _____					OR		\$ 770	
Total Filing Fee \$ _____							\$ 770	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	X \$ _____ =		X \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	X \$ _____ =		X \$ _____ =	
Total Additional Fee \$ _____					OR		\$ _____	
Total Additional Fee \$ _____							\$ 770	
* If the entry in (D) is less than the entry in (C), Write "0" in column 3.								
** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.								
*** After any cancellation of claims.								
**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).								
***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).								
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.								
<input type="checkbox"/> Please charge Deposit Account No. <u>19-1090</u> in the amount of _____. A duplicate copy of this sheet is enclosed.								
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>19-1090</u> . A duplicate copy of this sheet is enclosed.								
<input checked="" type="checkbox"/> A check in the amount of \$ <u>770</u> to cover the filing/additional fee is enclosed.								
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on form PTO-2038.								
 <u>David V. Carlson</u>					Signature of Applicant, Attorney or Agent of Record			
<u>April 21, 2004</u>					<u>David V. Carlson</u>			
<u>Date</u>					<u>David V. Carlson</u>			
<u>31,153</u>					<u>Typed or printed name</u>			
<u>Registration Number, if applicable</u>					<u>Typed or printed name</u>			

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

EXPRESS MAIL NO. EV347012733US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Aloys Wobben
Filed :
For : WIND POWER PLANT WITH A TRANSFORMER
FIXED TO THE TOWER
Docket No. : 970054.401RI

Corresponding Issued U.S. Patent:

Patent No. : US 6,400,039
Issued : June 4, 2002
Serial No. : 09/647,857
Filed : April 13, 1999
PCT No. : PCT/EP99/02461
Examiner : Nicholas Ponomarenko
Art Unit : 2834
Docket No. : 970054.401USPC

Mail Stop Reissue
Commissioner of Patents and Trademarks
P.O. Box 1450
Alexandria, VA 22313-1450

OFFER TO SURRENDER THE ORIGINAL PATENT

I, Aloys Wobben, owner of the entire interest in U. S. Letters Patent No. 6,400,039, which is entitled WIND POWER PLANT WITH A TRANSFORMER FIXED TO THE TOWER and issued on June 4, 2002, to me, hereby offer to surrender said Letters Patent.

Date 18.3.2004 By: Aloys
(signature)

Name: Aloys Wobben

Title:

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